

Spring 4-1910

Volume 02, Number 02

College of Medical Evangelists

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Recommended Citation

College of Medical Evangelists, "Volume 02, Number 02" (1910). *The Medical Evangelist*.
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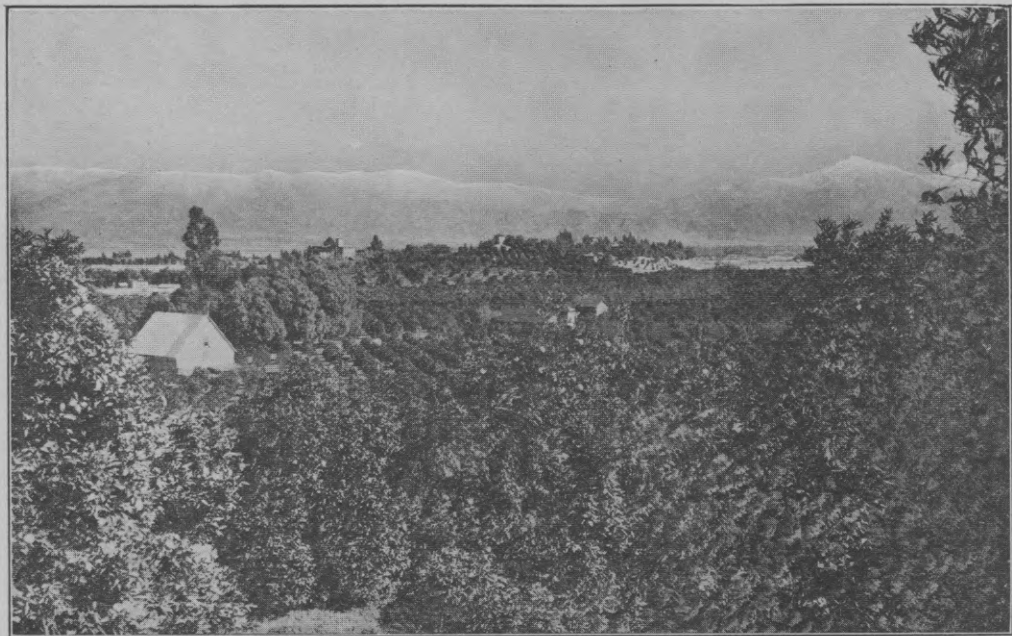
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The Medical Evangelist

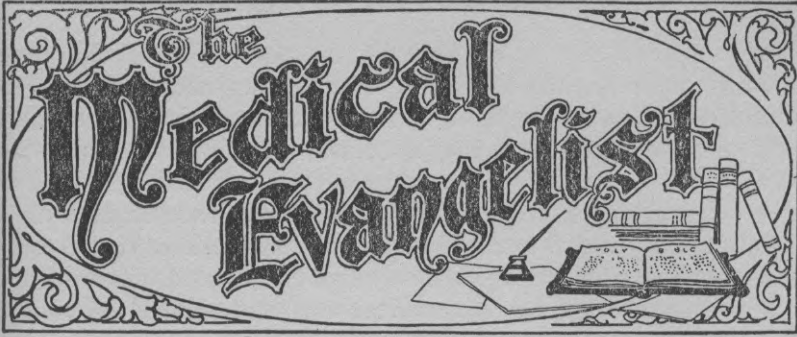


AND HE SENT THEM TO PREACH THE KING-
DOM OF GOD, AND TO HEAL THE SICK - Luke 9:12

P. J. [unclear]



A View of Loma Linda Looking East



Vol. 2

Loma Linda, Cal., Second Quarter

No. 2

Dependence Upon God

Sanitarium, Cal., April 27, 1910

I wish to express to you some thoughts that should be kept before the sanitarium workers. That which will make them a power for good is the knowledge that the great Medical Missionary has chosen them to this work, that He is their chief instructor and that it is ever their duty to recognize Him as their teacher.

The Lord has shown us the evil of depending upon the strength of earthly organizations. He has instructed us that the commission of the medical missionary is received from the very highest authority. He would have us understand that it is a mistake to regard as most essential the education given by physicians who reject the authority of Christ, the greatest Physician who ever lived upon the earth. We are not to accept and follow the view of men who refuse to recognize God as their teacher, but who learn of men, and are guided by man-made laws and restrictions.

During the night of April 26 many things were opened before me. I was shown that now in a special sense we as a people are to be guided by divine instruction. Those fitting themselves for medical missionary work should fear to place themselves under the direction of worldly doctors, to imbibe their sentiments and peculiar prejudices and to learn to express their ideas and views. They are not to depend for their influence upon worldly teachers. They should be "looking unto Jesus, the author and finisher of our faith."

The Lord has instructed us that in our institutions of educa-

tion we should ever be striving for the perfection of character to be found in the life of Christ, and in His instruction to His disciples. Having received our commission from the highest authority, we are to educate, educate, educate in the simplicity of Christ. Our aim must be to reach the highest standard in every feature of our work. He who healed thousands with a touch and a word is our physician. The precious truths contained in His teachings are to be our front guard and our reward.

The standard set for our sanitariums and schools is a high one, and a great responsibility rests upon the physicians and teachers connected with these institutions. Efforts should be made to secure teachers who will instruct after Christ's manner of teaching, regarding this of more value than any human method. Let them honor the educational standards established by Christ, and following His instruction, give their students lessons in faith and in holiness.

Christ was sent of the Father to represent His character and will. Let us follow His example in laboring to reach the people where they are. Teachers who are not particular to harmonize with the teaching of Christ, and who follow the customs and practices of worldly physicians, are out of line with the charge that the Saviour has given us.

It is not necessary that our medical missionaries follow the precise track marked out by the medical men of the world. They do not need to administer drugs to the sick. They do not need to follow drug medication in order to have influence in their work. The message was given me that if they would consecrate themselves to the Lord, if they would seek to obtain under men ordained of God a thorough knowledge of their work, the Lord would make them skillful. Connected with the divine Teacher, they will understand that their dependence is upon God and not upon the professedly wise men of the world.

Some of our medical missionaries have supposed that a medical training according to the plans of worldly schools is essential to their success. To those who have thought that the only way to success is by being taught by worldly men and by pursuing a course that is sanctioned by worldly men, I would now say, put away such ideas. This is a mistake that should be corrected. It is a dangerous thing to catch the spirit of the world; the popularity which such a course invites will bring into the work a spirit which the Word of God can not sanction. The

medical missionary who would become efficient, if he will search his own heart and consecrate himself to Christ, may be diligent in study and faithful in service, learn how to grasp the mysteries of his sacred calling.

At Loma Linda, at Washington, at Wahroonga, Australia, and in many other sanitariums established for the promulgation of the work of the third angel's message there are to come to the physicians and to the teachers new ideas, a new understanding of the principles that must govern the medical work. An education is to be given that is altogether in harmony with the teachings of the Word of God.

In the first chapter of Ephesians, verse 2, we read: "Grace be to you, and peace, from God our Father, and from the Lord Jesus Christ. Blessed be the God and Father of our Lord Jesus Christ, who hath blessed us with all spiritual blessings in heavenly places in Christ; according as He hath chosen us in Him before the foundation of the world: that we should be holy and without blame before Him in love; having predestinated us unto the adoption of children by Jesus Christ to Himself, according to the good pleasure of His will, to the praise of the glory of His grace, wherein He hath made us accepted in the beloved. In whom we have redemption through His blood, the forgiveness of sins, according to the riches of His grace; wherein He hath abounded toward us in all wisdom and prudence; having made known unto us the mystery of His will, according to His good pleasure which He hath purposed in Himself." Study the whole of this chapter, and grasp the assurances that are given again and again for your acceptance.

It is a lack of faith in the power of God that leads our physicians to lean so much upon the arm of the law, and to trust so much to the influence of worldly powers. The truly converted man or woman who will study these words of inspiration spoken by the apostle Paul may learn to claim in all their depth and fullness the divine promises.

I am charged to present these Scriptures to our people, that they may understand that those who do not believe the Word of God can not possibly present to those who desire to become acceptable medical missionaries the way by which they will become most successful. Christ was the greatest physican the world has ever known; His heart was ever touched with human

woe. He has a work for those to do who will not place their dependence upon worldly powers.

God's true commandment-keeping people will be instructed by Him. The true medical missionary will be wise in the treatment of the sick, using the remedies that nature provides. And then he will look to Christ as the true Healer of diseases. The principles of health reform brought into the life of the patient, the use of nature's remedies, and the co-operation of divine agencies in behalf of the suffering, will bring success.

Satan will try to place barriers in the way of the true medical missionary. He will seek to bring discouragement upon those who recognize the commandments of God, and are determined to obey them. We must be careful not to carry our views of health reform to extreme, thus making it "health deform." Our food should be plain and free from all objectionable elements, but let us be careful that it is always palatable and good.

A time will come when medical missionaries of other denominations will become jealous and envious of the influence exerted by Seventh-day Adventists who are working in these lines. They will feel that influence is being secured by our workers which they ought to have. We should have in various places, men of extraordinary ability, who have obtained their diplomas in medical schools of the best reputation, who can stand before the world as fully qualified and legally recognized physicians. Let God-fearing men be wisely chosen to go through the training essential in order to obtain such qualifications. They should be prudent men who will remain true to the principles of the message.

These should obtain the qualifications and the authority to conduct an educational work for our young men and our young women who desire to be trained for medical missionary work.

Now while the world is favorable toward the teaching of the health reform principles, moves should be made to secure for our own physicians the privilege of imparting medical instruction to our young people who would otherwise be led to attend the worldly medical colleges. The time will come when it will be more difficult than it now is to arrange for the training of our young people in medical missionary lines.

(Signed) ELLEN G. WHITE.

The Secret of Success

Dr. D. D. Comstock

After the individual's preparation for the work, which of course is of first importance, the medical missionary work presents itself in two branches: the institutional work and the field work, or that of the medical missionary evangelist. The former, to my mind, needs to take a step to a higher plane; and the latter work should be enlarged.

Before our sanitariums have the success we desire so much to see, I believe it will be necessary for us to exercise more faithfulness as well as more faith: faithfulness in following the Lord's plans for His work and in our duty toward the patients that come to us, and faith in Him to send us more patients and give us the desired prosperity. Sometimes it seems to me that we have a greater anxiety to get and to hold patients than we have to give them the physical and spiritual help we have for them; consequently we often find ourselves striving for a financial success and to "make both ends meet," rather than for greater efficiency and grace to present our message of hope and health more effectively. When this reversed order prevails, our sanitariums, instead of maintaining that Christian dignity and scientific medical perfection which they should maintain, are in danger of degenerating either into mere hotels for wealthy tourists or into what might be called, vegetarian boarding-house with bath-room attached.

Let us do our work faithfully and prayerfully, then we can have more boldness to go to the Throne of Grace for wisdom and help, and we will learn to put greater trust in the Lord; then I believe He will send us patients of His choosing and keep our sanitariums full, and our hearts and hands as well, and the cash drawer will suffer no lack. The Lord tells us that the medical missionary work is of Him and bears His signature; therefore He will honor it and glorify it, if we will let Him. When we do the work He would have us do, more earnestly, I believe He will show His approval in an unmistakable way, and His power will be more often manifest in the healing of the sick in answer to prayer.

And then in dealing with our patients let us apply the Golden Rule more often. Let us consider their interests also, not their wishes necessarily, but the thing that is best for them. To my

personal knowledge many patients come to our sanitariums at a great sacrifice; sometimes even mortgaging their homes to get the means. How disheartening it is to them if after coming to us, they find that we consider them with more or less indifference. How grateful they feel, and how tender and susceptible their hearts become when they see us taking a personal interest in them, considering their financial status, teaching them and explaining to them how to live and continue getting well at home: thus saving them from the expence of staying at a sanitarium. Such people have a very warm feeling toward the sanitarium. We have their confidence, and they will hear the whole truth, being less likely to resent what we may say about their souls. The benefit and improvement they see in themselves after going home—which we all know is often the case—they will accredit to the help they received at the sanitarium. Treated otherwise they may never feel themselves under sufficient obligation to us to permit us to talk to them about their own soul's eternal welfare. If we keep them until their money is gone and still they are not well, they will go home without a kindly feeling toward the sanitarium and engage some osteopath, magnetic healer or such, about the time the results of the sanitarium treatments do appear, and he gets the credit due the institution. Of course there are many patients who should for their best good stay in the sanitarium for a longer period of time even if at considerable expense; but let us be conscientious in dealing with all.

One point further in regard to our medical institutions: I believe it is displeasing to the Lord for us to be behind the world in scientific work. He would have us be the head and not the tail. Let us keep in the front ranks in up-to-date scientific medicine. Many institutions of the world will soon be ahead of us in some things the Lord especially gave to us years ago through the Spirit of Prophecy. The ideas in regard to the healthfulness of thorough mastication of food and sleeping out of doors, the value of hydrotherapy in the treatment of acute and chronic diseases, and many others being presented to the world to-day, though oftentimes taught with an intermixture of sophistry and error, were given to us in principle more than a score of years ago. Had we been more faithful, the name of the Lord would have been glorified instead of the names of men; so let us have our institutions known in the

world both by their Christian dignity and their scientific perfection, and believe the Lord will bless us abundantly and help us to gather out many precious souls for whom our Saviour died.

The field work, or that of the medical missionary evangelist, is one branch of our work in which we have not done as much as we ought. I have no experience or opinion as to the wisest plan to be pursued in this in all its various phases. However, I am sure that those engaging in it should be men and women thoroughly converted, having an intelligent, practical and practicable understanding of the work; whose lives should be examples of healthful living in its simplicity and wholesomeness; neither teaching nor recommending to others things they are unable to live out in their own daily lives; avoiding radicalism, which will prove unwholesome as well as uninviting; being intelligent as to the needs of the human body and resourceful as to ways in which these needs can be supplied; not having simply one set of rules for everyone to follow, but principles which may be adapted to each individual's needs: for as we can not all becomingly wear the same fitting clothes, neither can we all enjoy perfect health by following the same program, in its detail, in the matter of diet, exercise, etc.

In this work let us make it truthfully and plainly evident to the people that we are out working in their interest; that we are humbly and unselfishly following in the steps of Him who "went about doing good." In doing this work we must make sacrifices,—not such as would burden the conference,—but personal sacrifices, such as the good Samaritan made. Discretion must be used lest the people get the impression that we are simply out advertising. Many times I have heard the criticism made that certain chautauqua lecturers, demonstrators and others, while professedly working for the good of the people, were apparently out for the ulterior purpose of advertising certain brands of health foods and certain sanitariums. Such impressions as these will never give character to our work and will create contempt instead of breaking down prejudice that people may see the message of truth for this time, to which this work is but the right arm. Our sanitarium training schools should give special courses along these lines and encourage the nurses to go out in this work, combined with tent and Bible work. If this were done, I believe that more workers would be giving their entire time and effort to the interests of the mes-

sage, and fewer would be permitted—or compelled—to go out into private nursing because of the attractions of higher pay or of necessity.

The secret of success in this work lies in these two essentials: consecration and co-operation, the consecration of each individual connected with the work, co-operation on the part of the various sanitariums, the training schools and the field workers in the conference.

Revelation and Science

Such, then, are the relations which the Scriptures and science sustain toward each other and to the welfare of mankind. The one is the mighty moral; the other, the great material element of human progress. The one is primary and essential; the other subordinate, but greatly subsidiary. The one, though mainly designed as man's guide to a higher and more blessed existence, has, by direct suggestion and by regulating influence over disordered faculties, placed reason in a position to grapple with the problems of the world. The other, in solving these problems, has not only evoked from nature's treasure-house, and placed in human hands vastest appliances for efficiency and enjoyment, but has brought from every corner of creation lights to illuminate the sacred pages, voices to swell the chorus of praise to their divine Author and hands to bear to the remotest habitation of our planet the venerable records of revelation.

By the one is opened the way to spiritual; by the other, to natural good. That tells us of our unseen but gracious Father in heaven, and of a future glorious home with Him. This shows us tokens of His greatness and goodness, in the wondrous structure of our probationary dwelling-place. Upon the dark mystery of mortality the revealed Word sheds a blessed light. In tones of authority it bids into submission wayward and unhallowed passion. It whispers peace to the troubled breast, and on the anxious, trembling spirit, binds the wings of eternal hope. . . . It sweetens all existence and surrounds even the grave with bright visions of faith. Unhappy the people and most wretched the man to whom the divine Word is not thus wisdom and life!

But without the triumphs of science, too, there is amazing loss. By these are opened the portals of nature's mighty temple,

and men behold there, mirrored forth the glory of their Maker. By these, fire and air, earth and sky, wind and waves, with energies exhaustless, are made willing servants to human creatures. By these we have victory over darkness and distance, over arctic frost and topical drought, and over sterile soils and unpropitious seasons. These minister to the hungry, food: covering to the unclothed; and to the houseless, shelter. Here heart and intellect may find exercise in a boundless field, and heroic enterprise can gather richest rewards. Here wealth immeasurable is poured into the lap of civilization, and the church finds multiplied without limit the means of fulfilling her Lord's last command to "preach the gospel to every creature."

And since this is the real truth of the case between science and religion, since they actually sustain relations so significant toward each other and toward heaven's benign purposes for mankind, we may conclude, in the language of so sound a thinker and so forcible a writer as Dr. McCosh, that,—

"It is, assuredly, no useless or profane work that is engaged in by those who would, with proper humility, endeavor to remove jealousies between parties whom God hath joined together, and whom no man is at liberty to put assunder. . . . We are not lowering the dignity of science when we command it to do what all the objects it looks at and admires do when we command it to worship God. Nor are we detracting from the honor which is due to religion when we press it to take science into its service.

"Let not science and religion be reckoned as opposing citadels, frowning defiance upon each other, and their troops brandishing their armor in hostile attitude. Science has a foundation, and so has religion; let them unite their foundations, and the basis will be broader, and they will be two compartments of one great fabric reared to the glory of God. Let the one be the outer and the other the inner court. In the one, let all look and admire and adore; and in the other, let those who have faith kneel and pray and praise. Let the one be the sanctuary where human learning may present its richest incense as an offering to God; and the other the holiest of all, separated from it by a veil now rent in twain, and in which, on a blood-sprinkled mercy seat, we pour out the love of a reconciled heart, and hear the oracles of the living God."

W. N. PENDLETON, (1860)

Hydrotherapy in Shock and Vasomotor Paresis

George Knapp Abbott, M. D.

The fact that many remedies are recommended for any certain condition is quite conclusive proof that all, or nearly all, of these remedies are valueless. It may also reveal the fact that the real state of the body in such disorders is by the majority but illy understood. This is true of the condition known as "shock." For the last fifteen years a kalidoscope series of remedies have one after another been vaunted as specifics, each to fall into disuse after a variable period of popularity. A few drugs have seemingly maintained their popularity in the treatment of this condition.

If one may from the therapy usually employed in shock judge of the prevailing opinion as to the function at fault, we might unquestionably say that by the majority of practioners the altered heart action is believed to be the chief derangement. Nearly all the drugs given in shock are supposed to be heart stimulants. This is pre-eminently true of strychnine since it is so universally given in this condition and so frequently combined with other medicaments given for the same condition.

May we not reasonably question the culpability of the heart in shock. Loss of blood or decided reduction in the body fluids is one of the causes of lowered blood pressure and contributes to the state known as shock. This is now recognized, and to meet it we employ in a rational manner the proper remedy; namely, the introduction of a saline fluid into the body by one of two or three avenues. In other respects, however, the usual treatment of shock can hardly as yet be said to rest upon any rational basis.

Shock, as we know, is accompanied by a state of profound nervous debility. It is not, however, through the nerves of the heart itself that the heart action is deranged to any great extent. The whole clinical picture of shock, barring loss of blood, points toward the failure of the vasomotor mechanism. The lowered blood pressure, the cold cyanotic skin and the clammy perspiration reveal a state of intense vasomotor paresis.

In health the blood vessels are constantly undergoing rhythmic variations in calibre. This pumping action of the "peripheral heart" plays no small part in the circulation. Of this, one may satisfy himself by calling to mind the contrast between

the condition of the intact and the paralyzed side in a case of recent apoplexy. The arm of the paralyzed side is blue and cold and the blood pressure is markedly reduced, while the opposite side reveals no such changes.

The cause can in the nature of the case, lie only in the vasomotor nerves. If the blood vessels of the entire body are in this state, the secondary effect upon the heart action at once becomes apparent. The resistance governor being removed, the heart literally "runs away with itself." Its action is rapid and feeble. This state of things also exists in other conditions; for example, it has been shown by Passler and Romberg (1895) that a vasomotor paresis exists in infectious diseases. These same investigators have also shown that while central control of the vasomotors is markedly impaired in bacterial toxæmia that nevertheless the reflex excitability remains in tact. This then supplies an avenue by which the effects of the vasomotor paresis may be overcome. The vasomotors are powerfully stimulated by hydropathic and mechanical applications to the skin.

The great value of stimulation of the peripheral heart in *actual* cardiac incompetency is recognized by all who employ physiologic therapy. In organic heart disease, vasomotor tonics act upon the heart indirectly, i. e., through stimulation of the blood vessels. Vascular tonics can scarcely be of less value where the fault lies in the blood vessels themselves. In the great majority of cases the so called "heart failure" of shock does not exist. The real condition is a vasomotor paresis. Therefore to aim at the already embarrassed heart, a series of hypodermic stimulants (?) is an entirely unnatural procedure. Some one has said, "repeated doping with strychnine to the heart is like licking a dying horse when he is down." Crile (1903) has experimentally demonstrated the truth of this aphorism. He found that while one or two doses of strychnine given to a *normal* animal do stimulate the heart, that this could not be accomplished by repeated doses and depression results. Further than this, he found that where a state of shock already existed, even one dose of strychnine only intensified the condition. We have, therefore, no rational basis for the use of strychnine as a heart stimulant; in fact it is decidedly counterindicated in shock and all similar states where the heart is incompetent or its action embarrassed.

We are not, however, left without rational, scientific means

of demonstrated value in these conditions. One of these has been mentioned, viz., the introduction of saline solution into the body in order to increase the amount of circulating fluid and thus raise blood pressure and indirectly stimulate the heart's action and vascular activity. Those forms of physiologic therapy which aim directly at the toning up of the vasomotor mechanism are, however, too little appreciated by us as physicians. The operating room is one of the best places in which to demonstrate the value of hydrotherapy and of the cold mitten friction in particular.

In the treatment of shock the cold mitten friction is not surpassed by any other means, medicinal or physical. It is often best to precede the application by a brief hot fomentation in order to secure a more prompt and decided reaction. The heart may be steadied by the application of an ice bag to the precordia; or in extreme cases, it may be effectually stimulated by rapidly alternating hot and cold applications, the cold to be accompanied by brisk friction. However, the most important and the most beneficial agent in combating vasomotor paralysis is the cold mitten friction. The skin is reddened, the blood current is quickened and splanchnic engorgement is reduced by the cutaneous hyperæmia. The cold perspiration is checked and shortly the skin warms to a normal degree. These astonishingly prompt and decidedly beneficial results, it is impossible to even approximate by medicinal means.

Forchheimer has recently emphasized the importance of the part played by the vasomotors in the mortality of pneumonia. He brings forward good evidence to show that so-called heart failure is not due to the heart per se. As pointed out by Romberg and Passler, the circulatory failure is due to the action of the toxic albuminoid produced by the pneumococcus. This paralyzes the vasomotor centre. And here also, while it is not possible to accomplish much by central stimulation, yet the avenue of reflex excitability remains open for therapeutic use. Baruch places much stress upon the sustaining of the peripheral circulation in pneumonia as next in importance to enhancing as complete aeration of the blood as possible. This too, while calling for that most beneficial measure in pneumonia—fresh air—also reveals the necessity of so stimulating the circulation that the inspired oxygen may be available for the use of the tissues.

A Letter from the Mussoorie Sanitarium, India

The information contained in your letter about the earnest prayers of the young people in California for missionaries in the foreign fields gives us more courage than it is possible to express in a letter. Missionaries soon learn that there is no greater help for their work than the faithful earnest prayers of friends in the home-land. I trust the friends in California will continue to remember us in their prayers, and that they will make special mention of our work in Mussoorie.

One request we would have you remember before the throne of grace is that the Lord will open the way whereby we may have a place of our own in which to conduct sanitarium work. We are at present located in a building of which I am enclosing a photograph, not at all suitable for Sanitarium work, but it is the best we can secure in this station. In fact, one would not entertain the idea of operating a Sanitarium at home under similar conditions. Our water is brought to us on the backs of coolies in goat-skins up the mountain side. The water is heated in a zinc tank, and the only fuel we have is charcoal. Our treatment rooms are on the ground floor, the patients' rooms are above; the only means of communication between the two is by going out of doors for quite a little distance, which means great inconvenience to our nurses during the four months of almost continuous and drenching rain. This will give you but a meager idea of the conditions we must meet to do our Sanitarium work, but with all this, we are not discouraged by any means, for in India one finds unlimited opportunities and possibilities.

There are one hundred forty-seven tongues in India, and we have thus far entered only six of the leading languages, so you will understand the great work that still lies before us. If all the young people in the United States could be set to work in India, it would not be too great an army of workers for the vast task we have in hand. This being impossible, our aim is to train native workers of this field for the work among their own people as rapidly as possible.

Aside from our Sanitarium we have six dispensaries in these different tongues located out in the districts where for many miles no other medical aid is available. In some of these dispensaries nearly a hundred patients are treated daily.

H. C. MENKEL

The Medical Evangelist

A JOURNAL DEVOTED TO FURTHERING A KNOWLEDGE
OF MEDICAL EVANGELISTIC EDUCATION AND WORK

10 cents per copy

25 cents per year

SECOND QUARTER, 1910

EDITORS

GEORGE KNAPP ABBOTT, M. D. GEORGE McCREADY PRICE

Published Quarterly by THE COLLEGE PRESS, Loma Linda, California

EDITORIALS

Disregard of Law and Morals

In Mr. Bolce's recent articles in the Cosmopolitan Magazine we are again reminded that the great colleges of America are propogating revolutionary and anarchistic doctrines; and that these are being inculcated where they are best calculated to undermine the future homes of our land. In the women's colleges no less than in other educational institutions it is being taught that moral and social laws are like changes of raiment; that they vary according to the prevailing styles and customs. Now customs are habits and are no more likely to be built upon laws of right than upon perversions of right, and usually less so.

Moral and spiritual laws are no more changeable than physiologic laws. Both are the requirements of life and ultimate good, the inexorable laws of an omniscient Creator. Adaption is no proof of mutability in the moral realm any more than in the physical realm. That desert plants are few and dwarfed is the most positive proof of the inexorable requirements of physiologic laws. On the other side the present unsettled state of society is no less a certain revelation of the unchangeableness of the decalogue and the sure results of transgression of its precepts.

In the scientific world habit and custom are being disregarded in the search for nature's laws. How utterly at variance with this progress is the tendency—yes, *flood-tide*—in our universities bearing the youth of our land in the opposite direction,—a direction away from fixed standards.

This peculiar situation, paradoxical as it may seem, is one of the conditions pointed out by the prophecies as existing in the last days. The cause of these things is clearly brought to view

in Romans 1: 21-22, "Because that, when they knew God, they glorified him not as God, neither were thankful; but became vain in their imaginations, and their foolish heart was darkened, Professing themselves to be wise, they became fools."

Several subscribers to the MEDICAL EVANGELIST have sent us letters commendatory of the article on "The Use of Drugs" which appeared in our last issue. These words of approval are gladly received. One subscriber has written as follows: "I want to express our appreciation of the courage of the editors of the MEDICAL EVANGELIST in publishing the matter on drugs, which they did in the last number. We sincerely hope that the new college will work on lines according to God's pattern. We are sick and tired of the wisdom of men. We want something straight from heaven, and seeing we have it plain and simple, it seems as though we ought to have faith enough to follow it, and then expect God will do something out of the ordinary to mark His approval." Another writes: "I was much interested in your report of malaria in the last number of the MEDICAL EVANGELIST. I also appreciated very much your article on 'Shall We Continue the Use of Drugs?'; and by way of encouragement to you, I will give a bit of my own experience. After reading the article and considering the statements of the Testimonies regarding drugs, I went to my medicine chest, took out two bottles of nux vomica and poured out the contents. I believe we shall make much better progress in our work by following the instruction of the Testimonies to the letter as closely as possible. Give us more of this kind of matter; it is helpful." If this people is to lead in reform work, advance steps must be taken very rapidly, as many of the best physicians who have had none of the light entrusted to us, are discarding drugs almost entirely." "Strychnine is sort of a habit with a surgeon; *I must say I have never seen it do any good.*" These are the words of Dr. W. J. Mayo as heard by the Editor recently at the Rochester Clinics. It was said in the presence of thirty or forty visiting physicians, many of whom later voiced the same judgment. Let us study carefully into the different effects of natural means of treatment, that we shall be able to meet the varying needs of the patients who entrust themselves to our care, and not be found unprepared in emergencies or under any trying circumstances.

A Letter from a Visiting Missionary Nurse

"The hand of the Lord is on the helm of every circumstance."

Soon after I came home a man was hurt in front of our house by being kicked by a horse. He was carried home. I enquired where he lived and went to his house and taught his wife how to give him fomentations. The fomentations relieved his suffering during the days that followed, so much, that they were very friendly to me. Yesterday I visited them again and took them some tracts. I was surprised to learn that they had come out from the Lutheran Church, and before coming to this place had been Sabbath keepers. Because of the husband's business they had given up keeping the Sabbath, although still believing in the truth. The wife was pleased when I suggested having Bible studies with them on Sabbaths, and said, "We will have Sabbath School together."

In talking with the Baptist Minister at this place, I found he was a Seventh-day Adventist in much of his belief. During our conversation he spoke of a question raised by a prominent clergyman: "Is it possible for a young man to finish a course in one of our theological seminaries of the present day and not lose his spirituality?" Regarding his own experience, he said, "There were two things I expected to find in a theological seminary: first, I expected to get a clear bird's-eye view of the Scriptures, and secondly, I expected to find there as students, men of the very highest type of spirituality. I was disappointed. I found neither. I had also hoped that the teachers in the school would give wise counsel concerning the relation of life to spiritual things, and that they would be men to whom I could look for advice. In this I was disappointed also. They were, at best, merely nominal Christians."

If the conditions in the theological schools are such as this, how about the medical schools of the world? Surely the "wisdom of the world is foolishness with God," and just as truly is the "preaching of the cross foolishness to them that perish." How thankful we should be for our denominational schools, where those seeking the true Bread are not turned away with a stone or a serpent—the product of the minds of men; but where all may drink deeply from the fountain of life, and those seeking to develop character, may be helped by the associations instead of being turned out of the way.

GRACE H. JENNINGS

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Loma Linda SANITARIUM

A View from Colton Avenue, Three-fourths Mile Distant



The Clear blue skies of Southern California, the beauty and fragrance of the trees and flowers and the splendid panorama of the famous San Bernardino Valley which spreads out before the visitor's gaze, combine to make Loma Linda one of the most beautiful places in the world. At the crest of the commanding elevation the Loma Linda Sanitarium overlooks this whole delightful scene—the fertile, fruitful valley at its feet, the tops of sun-kissed snow-capped mountains shimmering in the distance.

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Loma Linda, California